

Healthwatch Walsall Independent Strategic Advisory Board (ISAB) Public Meeting
25 March 2025 via MS Teams

Present: Ross Nicklin (RN) ISAB Chair
 Umaymah Nawaz (UN) ISAB Member (Part Meeting)
 Elizabeth Byrne (EB) ECS Managing Director – ISAB Member
 Simon Fogell (SF) ECS Chief Executive – ISAB Member
 Aileen Farrer (AF) HW Walsall Manager

Apologies: Herbie Khosah (HK) ISAB Member
 Andrew Green (AG) ISAB Member

Item		Actions
1.	<p><u>Welcome and Apologies</u></p> <p>Members were welcomed to the public ISAB Meeting and apologies were received as noted above.</p>	
2.	<p><u>Declaration of Interests</u></p> <p>No declarations of interest.</p>	
3.	<p><u>Minutes Public Board Meeting held on 3 February 2025</u></p> <p>The minutes of the public Board Meeting held on 20 August 2024 were agreed as an accurate record.</p> <p><u>Action Points 3 February 2025</u></p> <p>No actions from the meeting held on 3 February 2025</p>	
4.	<p><u>Update on the Work Programme 2024/2025</u></p> <p>Board paper outlined in detail and discussed as follows:</p> <p>Board were asked to note that there has been a delay to the publication of the 2 patient experience project reports on cancer services and urology services. Assurance was given that these would be published and shared with partners by 31 March 2025.</p> <p>There has also been a delay to the commencement of the young carers and unmet social needs project, which now includes their wider needs, therefore this</p>	

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	<p>will roll over into the 2025/2026 work programme and will run to the end of June. This will feature in the annual workplan for 2025/2026.</p> <p>Board acknowledged that a lot has been achieved during the year and noted the report.</p>																																																
5.	<p><u>Proposals for Work Programme 2025/2026</u></p> <p>Full discussion was held on the proposals put forward to Board which led to a slight adjustment of the project focus in certain instances. Rankings for the proposed work projects was noted and it should be noted that absent members had submitted their preferred options in advance of the meeting, and these had been taken into consideration during discussions.</p> <p>All options were discussed in detail including the amount of public feedback received per project suggestion along with any potential impact that could be achieved.</p> <p>It should be noted that EB and SF only put forward a first choice on the basis that it was agreed at the start of discussions, that 2 full projects would be sufficient to start the new work programme year. It was also noted that certain projects could lend themselves to paid work via partners, with any subsequent Board approval.</p> <table border="1" data-bbox="172 1115 1254 1442"> <thead> <tr> <th></th> <th>RN</th> <th>AG</th> <th>HK</th> <th>UN</th> <th>EB</th> <th>SF</th> </tr> </thead> <tbody> <tr> <td>Access and Barriers to Diagnostics</td> <td>4th</td> <td>1st</td> <td>1st</td> <td>3rd</td> <td></td> <td></td> </tr> <tr> <td>Barriers to Accessing Primary Care Mental Health Services for minority communities</td> <td>1st</td> <td></td> <td>2nd</td> <td>1st</td> <td>1st</td> <td>1st</td> </tr> <tr> <td>Dementia Services</td> <td>2nd</td> <td>2nd</td> <td>3rd</td> <td>2nd</td> <td></td> <td></td> </tr> <tr> <td>Access to GP Services for Young People</td> <td>3rd</td> <td></td> <td>4th</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Hospice Care</td> <td>5th</td> <td></td> <td>5th</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>Project 1 – Carry forward of the young carers project Project 2 – Barriers to accessing primary care mental health services for minority communities.</p> <p>Discussion followed on the possibility of undertaking a third in-year project around barriers to accessing secondary care mental health services for minority communities as this would lead on from the primary care focus. This suggestion received approval from Board, but it would not be formally proposed at this stage.</p> <p>In consideration of the proposals put forward importance was placed on the impact and difference our work project would have, whilst at the same time complementing local priorities.</p>							RN	AG	HK	UN	EB	SF	Access and Barriers to Diagnostics	4th	1st	1st	3rd			Barriers to Accessing Primary Care Mental Health Services for minority communities	1st		2nd	1st	1st	1st	Dementia Services	2nd	2nd	3rd	2nd			Access to GP Services for Young People	3rd		4th				Hospice Care	5th		5th				
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6.	<p><u>Escalation to HWE/CQC</u></p> <p>No escalations made to HWE/CQC.</p>	
7a	<p><u>Publish a report (February 2025 – Date)</u></p> <p>Board noted that the Insight Bulletins for January and February 2025 had been published.</p>	
7b	<p><u>Request for Information from Commissioners Providers</u></p> <p>No requests made.</p>	
7c	<p><u>Enter and View – Forward Plan</u></p> <p>Board had previously agreed the Enter & View visiting schedule as follows:</p> <ul style="list-style-type: none"> • April – Beth Page Supported Living • May – Portland Medical Practice • June – Inglewood Care Home 	
7d	<p><u>Decision about sub-contracting/commissioned work</u></p> <p>No opportunities for commissioned work.</p>	
7e	<p><u>Whether to report a matter concerning your activities to another person- e.g. ICB, Voluntary Sector, another Healthwatch, Advocacy services -</u></p> <p>No reports made.</p>	
7f	<p><u>Which health and social care services HW is looking at for priority project</u></p> <p>Refer to previous discussion under Item 5.</p>	
8.	<p><u>Refer a matter to Overview and Scrutiny Committee</u></p> <p>No matters referred.</p>	
9	<p><u>Breach/s of the decision-making process</u></p> <p>No breaches to report.</p>	
10.	<p><u>Health and Social Care Issues from the public</u></p> <p>No members of the public present.</p>	

Item		Actions
11.	<p><u>Any Other Business</u></p> <p>No items of any other business were raised.</p>	
12.	<p><u>Date and Time of Next Meetings</u></p> <p>Next meeting to be arranged.</p>	